

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

500 5/25/05

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 3/30/05

2 Serial/Patent #: 10/519558

3 Please refund the following fee(s):

	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing Fee Change			\$ 100.00
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

7 TOTAL AMOUNT OF REFUND

\$ 100.00

8 TO BE REFUNDED BY: CC

Treasury Check

Credit Deposit A/C #:

, 19 -- 481810

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Rita White

TITLE: Legal Assistant/Paralegal

SIGNATURE: Rita White

PHONE: 713-891-4040 ext. 231

OFFICE: DO/EO

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: _____

DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B